<b>Application</b>	or Docket	Number
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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I						SMALL ENTITY		OTHER THAN				
TOTAL CLAIMS			(Column 1) (Co		(Colu	mn 2) TYPE				OR 7		
TOTAL CLAIMS		9					RATE	FEE	4	RATE	FEE	
FOR		NUMBER FILED		NUMB	IUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20= *		0	l	X\$ 9=	(	OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = *		0		X43=	. —	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT						Ī	+145=	_	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						_	TOTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)					(Column 3)		SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL DDIT. FEE	· · · · · · · · · · · · · · · · · · ·	OR	TOTAL ADDIT, FEE	
		(Column 1)		(Columi	n 2)	(Column 3)	,					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MEI	Independent	*	Minus	***		=		X43=		OR	X86=	
4	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT C	CLAIM		┟	+145=	•		+290=	
							L	TOTAL		OR	TOTAL	•
ADDIT, FEE OR ADDIT, FEE												
		(Column 1) CLAIMS		(Column		(Column 3)	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	r	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						H						
+145=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+290=			
**	f the "Highest Nur	nber Previously Pa	id For IN THIS	SPACE is le	ess than	20, enter "20."	ΑĽ	TOTAL DIT. FEE	. '	OR ,	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												